2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000085760

Entity Name: FIRST COMMERCIAL INSURANCE COMPANY

FILED Apr 29, 2008 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
2300 WEST HIALEAH, F		US			
Current Mailing Address:			New Mailir	New Mailing Address:	
PO BOX 12 HIALEAH, F					
FEI Number:	65-0616750	FEI Number Applied For ()	El Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
P.O. BOX 6 200 E. GAIN TALLAHAS	SEE, FL 323 named entity	5200) 3990000 US	ose of changing it	s registered office or registered agent, or both,	
SIGNATUR					
SIGNATUR		nic Signature of Registered Agent		Date	
Election Cam		ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD (BEANE, REGI 2300 WEST 8 HIALEAH, FL	4TH ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TVDC (CAMBERT, RE 2300 WEST 8 HIALEAH, FL	4TH ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VVCD (ESPINOSA, LU 2300 WEST 8 HIALEAH, FL	4TH ST.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VDGC (CAMILLERI, M 2300 WEST 8 HIALEAH, FL	4TH ST.	Title: Name: Address: City-St-Zip:	D (X) Change () Addition DELGADO, JOSE L 2300 WEST 84TH ST. HIALEAH, FL 33016 US	
Title: Name: Address: City-St-Zip:	VDCO (MALONEY, JC 2300 WEST 8 HIALEAH, FL	4TH ST.	Title: Name: Address: City-St-Zip:	D (X) Change () Addition AGUERO, CARLOS E 2300 WEST 84TH ST. HIALEAH, FL 33016 US	
Title: Name: Address: City-St-Zip:	VAGC (PUCHADES, N 2300 WEST 8 HIALEAH, FL	4TH ST.	Title: Name: Address: City-St-Zip:	D (X) Change () Addition GUTIERREZ, MARCOS 2300 WEST 84TH ST. HIALEAH, FL 33016 US	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RENE CAMBERT TD 04/29/2008